



# REVIEW OF RESEARCH

ISSN: 2249-894X

IMPACT FACTOR : 5.7631 (UIF)

VOLUME - 11 | ISSUE - 5 | FEBRUARY - 2022



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## “ A STUDY ON ASSESSMENT OF MENTAL HEALTH AWARENESS OF BENEFICIARIES ATTENDED VACCINATION DRIVE UNDER AZADI KA AMRUT MAHOTSAV(AKAM)ORGANIZED BY PUNE SMART CITY CORPORATION LTD.(PSCDL) AT SMART CITY CLINIC ,BANER, PUNE, MAHARASHTRA.

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### ABSTRACT:

*During the global catastrophe of Covid-19, different harrowing experiences such as a never-seen-before state of lockdown, social distancing, quarantining, and physical isolation have greatly affected people's mental health.*

*The frightening first and second wave of Covid-19 affected the lives of the people phenomenally. Thus, to mitigate the impact of Covid-19, vaccination campaigns and initiatives for promoting vaccination awareness are being conducted at governmental, semi-governmental, social, and industrial levels for encouraging people to get vaccinated.*

*In an attempt to support the governmental efforts and help needy people with medical aid during this doleful situation of the pandemic, free health checkup camps were organized by Pune Smart City Development Corporation and Oasys Cybernetics Pvt. Ltd. whereby Fortitude Counselling Centre and Research Organization (FCCRO) had set up a mental health awareness booth for the citizens who visited the camp. Through these booths, a survey was conducted by FCCRO through a questionnaire based on a psychological test to understand the effects of Covid-19 on people's mental health over the past two years and to initiate open communication with them about Covid vaccination.*



**KEYWORDS:** Prehistoric Era, pre-literate and prehistoric period.

### INTRODUCTION

The main objective of the survey was to understand in detail the impacts of Covid-19 on the mindset of the society and proper guidance to people to improve their physical, mental, and emotional health. A total of 75 persons (male and female) were counselled based on the survey questionnaire. People were made aware of the importance of seeking help for mental illness or mental health issues like physical illness through one on one personal interactions during these camps.

The survey found that 68% of the participants were in the age group of 20 to 40 years. The participation of women was less than that of men. At the social level, mostly middle-class and lower-middle-class people were seen visiting these mental health booths and seeking consultation for their questions, thoughts, or guidance regarding mental health.

In this small survey study conducted during the health check-up camps, people were asked questions based on psychosocial health and psychosocial factors through a questionnaire. The questionnaire examined people's attitudes and awareness about mental health through their influence

on socio-natural factors, their level of physical and mental capacity, mental health, socialization, and personal social relationships. Through this survey, it was found that the satisfaction level of mental efficiency, social attitude towards mental health, and interpersonal relationships have increased.

The human body and mind are interrelated, many physical-mental-emotional changes or challenges easily affect human health. As physical changes or symptoms are immediately noticeable, they are treated with more attention in the field of health. Similarly, mental health issues are equally common and if they are treated with equal attention, many mental health problems can be easily prevented.

The upheaval, discomfort, and loneliness caused by physical and mental health issues during the Covid-19 global catastrophe have had a huge impact on the mental health of the people. Thus, through these health checkup interventions, FCCRO tried to debunk the myths and misconceptions about vaccination that occupied the minds of the people and tried to understand and address their mental health concerns through counselling.

The survey research was conducted on five topics namely interpersonal relationships, level of mental health, level of sociality, level of efficiency, level of satisfaction. In the research, subjects were examined at five levels namely very low, low, medium, high, very high. In the overall study, the categories are - very low 6.7%, low 34.7%, medium 48%. This shows that 89% of people are suffering from poor mental health.

Corona and lockdown have affected the overall performance and productivity of people. The level of satisfaction has decreased as people started to fear the future. As a result, interpersonal relationships are on the rise, and social relations are declining.

A community mental health program has been developed by Fortitude Counselling Centre and the Research Organization (FCCRO) to address the concerns based on this

The above findings were obtained through the study conducted during the period of the pandemic's peak time. Pune Smart City Development Corp. and Oasys Cybernetics Pvt. Ltd. Organized extended their complete support to Fortitude Counselling Centre and Research Organization (FCCRO) in organizing this program.

## REVIEW OF LITERATURE

### The Realization of an Idea

The term mental hygiene has a long history in the United States, having first been used by William **Sweetzer in 1843**. After the Civil War, which increased concern about the effects of unsanitary conditions, **Dr. J. B. Gray**, an eminent psychiatrist, envisioned a community-based mental hygiene that would operate through education, social culture, religion and involvement in national life. In 1893, **Isaac Ray**, a founder of the American Psychiatric Association, provided a definition of the term mental hygiene as "the art of preserving the mind against all incidents and influences calculated to deteriorate its qualities, impair its energies, or derange its movements. The management of the bodily powers in regard to exercise, rest, food, clothing and climate, the laws of breeding, the government of the passions, the sympathy with current emotions and opinions, the discipline of the intellect—all these come within the province of mental hygiene." (**Rossi, A.**, Some Pre-World War II Antecedents of Community Mental Health Theory and Practice. *Mental Hygiene*, 1962, 46, 78-98).

## RESEARCH METHODOLOGY

### Statement of the problem

This study will be focusing on the effect of mental health with reference to covid impact . There is a necessity of mental health intervention on physical, mental and social aspects of the community at large.

### **OBJECTIVES OF THE STUDY**

- 1 To understand the socio-demographic background of the respondents.
- 2 To assess the Mental health well-being of the respondents.
- 3 To know the health aspects of the respondents.
- 4 To understand the work-related issues of the respondents.
- 5 To suggest remedial measures for intervention.

### **SCOPE OF THE STUDY**

The study provides enough scope for identifying specific mental health issues and it helps the professionals to gain attention towards their roles and responsibilities.

### **METHODOLOGY**

The research design adopted for the study is descriptive and aims to find out mental health aspects with relevance to covid and psychological well-being of the peoples.

### **UNIVERSE**

The geographical area selected for the study was Baner, Pune.

### **SOURCES OF DATA COLLECTION:**

- 1 **Primary Data:** The researcher collected the primary data from people by interview.
- 2 **Secondary Data:** The secondary data was collected with the help of relevant literature published in Books, Journals, Magazines, official records, Internet, newspaper etc.

### **TOOLS OF DATA COLLECTION**

Structured interview schedule was prepared. The schedule consisted of information regarding background details, problems of peoples, health aspects, organizational aspects and psychological well-being.

### **DATA PROCESSING**

The data collected were checked, edited, coded and were processed through computer.

### **DATA ANALYSIS AND INTERPRETATION**

The statistical analysis was done by using excel and SPSS software. Interpretation was done on the basis of analysis of data.

### **LIMITATIONS OF STUDY**

This study attempted to find out the extent of mental health well-being among people. The participants may not be truthful or may not respond naturally when they are being observed.

The concerned study is limited to 75 respondents.

### **Sampling Method**

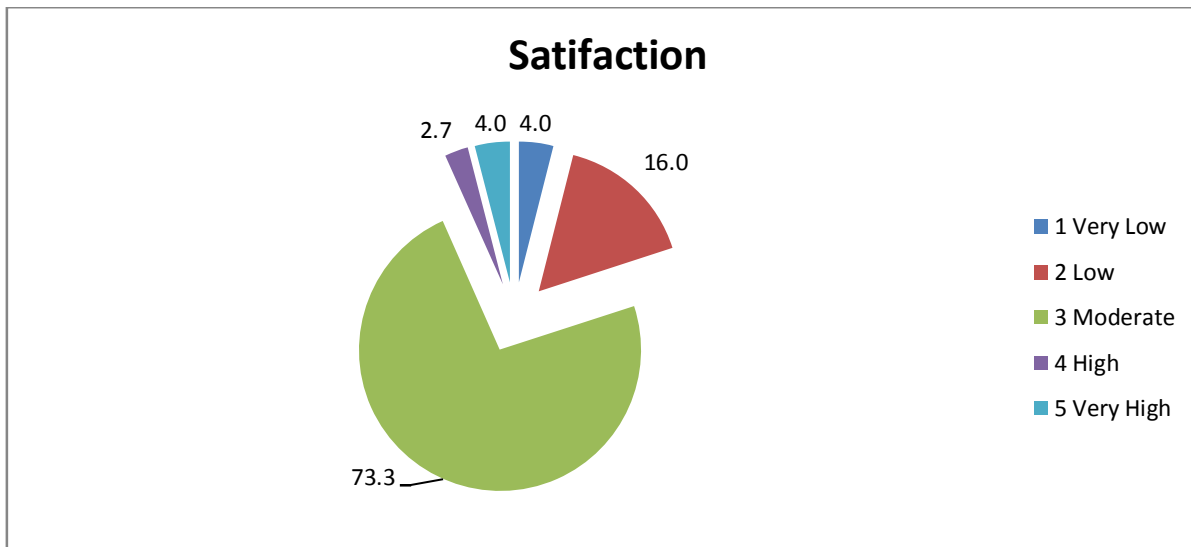
Simple Random sampling method was used for collecting the data.

### **Sampling Size**

The sample size constituted 75.

**Table No: - 1**  
**Satisfaction**

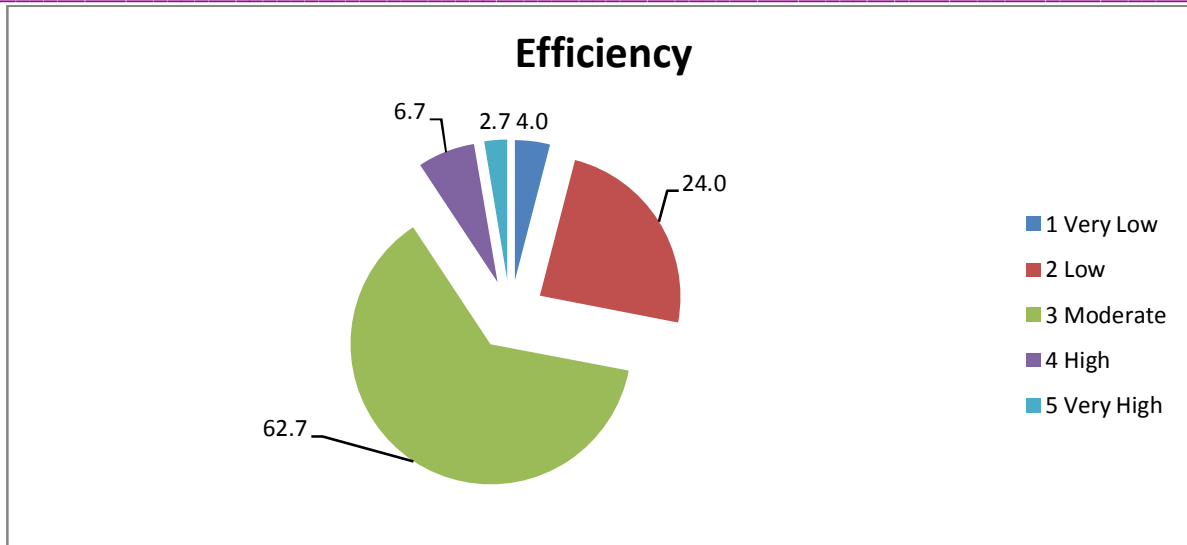
| Sr. No | Satisfactory | Frequency | Percentage |
|--------|--------------|-----------|------------|
| 1      | Very Low     | 3         | 4.0        |
| 2      | Low          | 12        | 16.0       |
| 3      | Moderate     | 55        | 73.3       |
| 4      | High         | 2         | 2.7        |
| 5      | Very High    | 3         | 4.0        |
|        | Total        | 75        | 100.0      |



The table no 92 disclose the subjective satisfaction among the respondents. it is quite evident that majority of them (73.3%) of them feel satisfied subjectively a moderate level. Feeling of discomfort is not good sign for mental health.

**Table No: - 2**  
**Efficiency**

| Sr.No | Efficiency | Frequency | Percentage |
|-------|------------|-----------|------------|
| 1     | Very Low   | 3         | 4.0        |
| 2     | Low        | 18        | 24.0       |
| 3     | Moderate   | 47        | 62.7       |
| 4     | High       | 5         | 6.7        |
| 5     | Very High  | 2         | 2.7        |
|       | Total      | 75        | 100.0      |

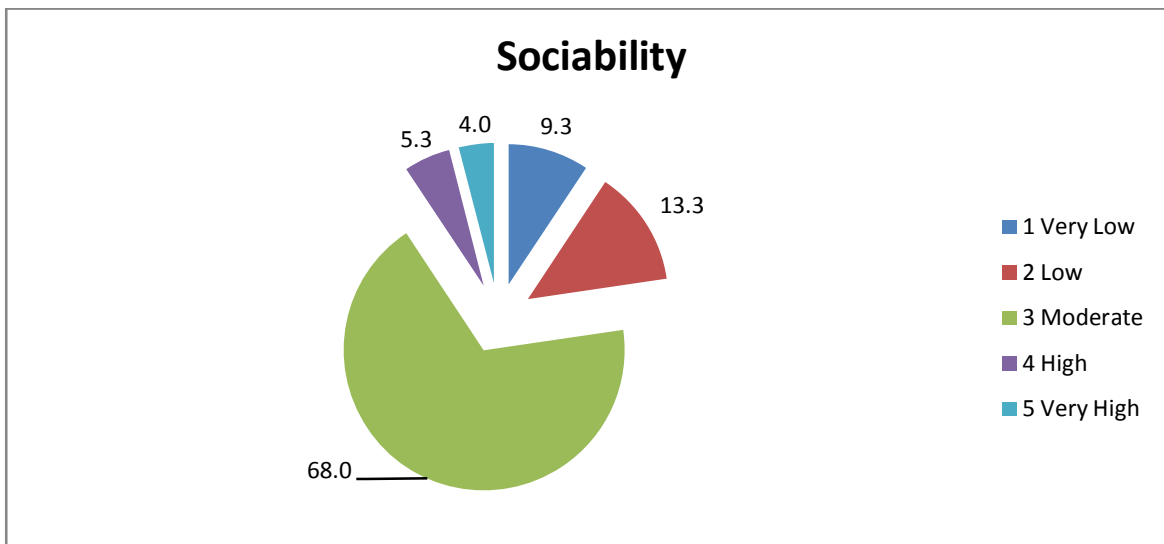


The above table no 93 depicts the efficiency of the respondents. It is seen that majority 62.7% of the respondents feel efficient at moderate level whereas 18% of them feel low efficiency.

The emotional burden leads to vacuum and this vacuum leads to poor efficiency. If the efficiency is reduced then the motivation does not sustain.

**Table no:- 3  
Sociability**

| Sr.No | Sociability | Frequency | Percentage |
|-------|-------------|-----------|------------|
| 1     | Very Low    | 7         | 9.3        |
| 2     | Low         | 10        | 13.3       |
| 3     | Moderate    | 51        | 68.0       |
| 4     | High        | 4         | 5.3        |
| 5     | Very High   | 3         | 4.0        |
|       | Total       | 75        | 100.0      |

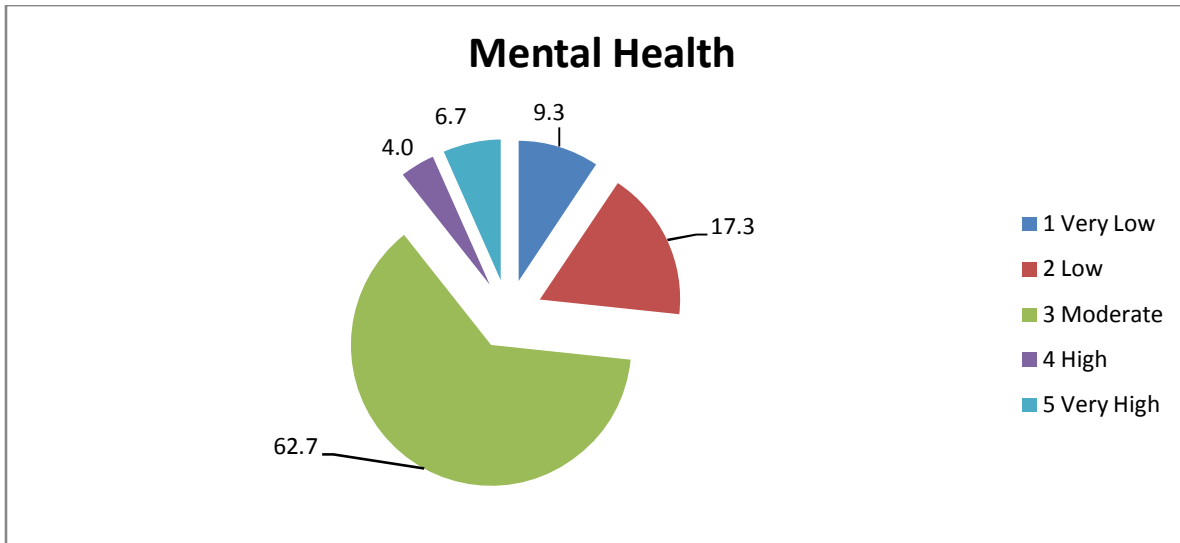


The data states the sociability of the respondent's majority (68% ) of the respondents feel social at moderate level. 10% feel very low socially.

The nature of the job gives them very less time to interact in social functions. They get socialized with the same colleagues having the similar kind of worries and attend but they do not find time to seek social support otherwise.

**Table no:- 4  
Mental Health**

| Sr.No | Mental Health | Frequency | Percentage |
|-------|---------------|-----------|------------|
| 1     | Very Low      | 7         | 9.3        |
| 2     | Low           | 13        | 17.3       |
| 3     | Moderate      | 47        | 62.7       |
| 4     | High          | 3         | 4.0        |
| 5     | Very High     | 5         | 6.7        |
|       | Total         | 75        | 100.0      |



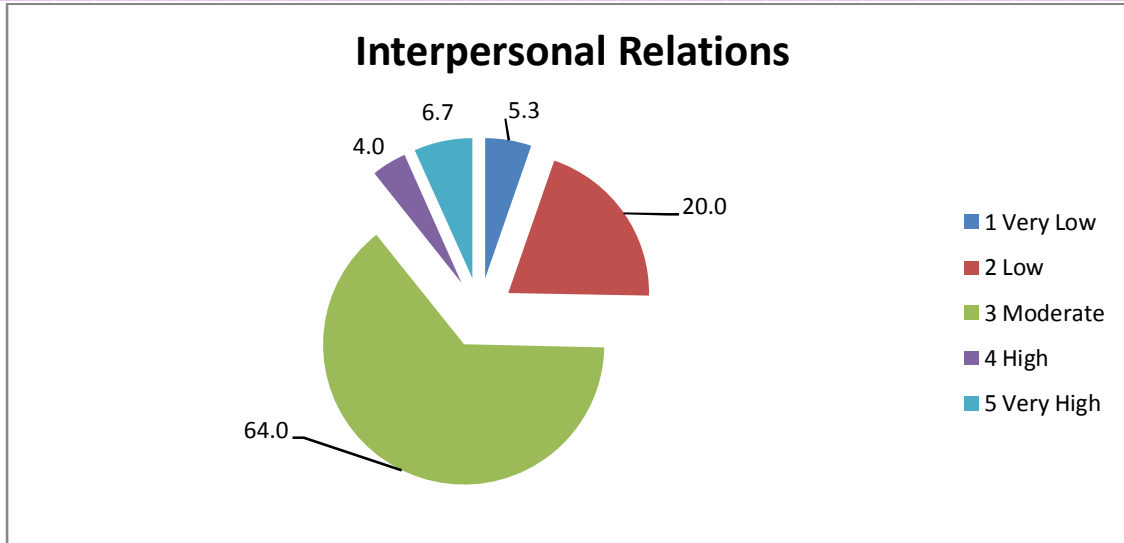
The above table disclose the overall mental health of the respondents.

It is seen that 62.7% of the respondent's majority have moderate mental health 17.3% of them have low mental health 9% have very low mental health.

Mental health is a core component of overall health. Moderate mental health may not sustain for a long time and may be a predisposing factor.

**Table No:- 5  
Interpersonal Relations**

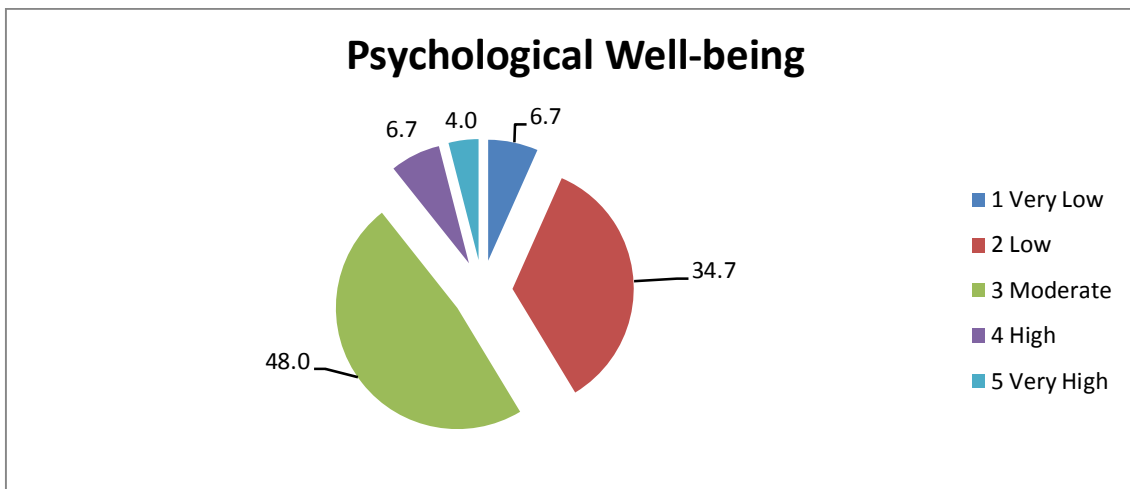
| Sr.No | Interpersonal Relations | Frequency | Percentage |
|-------|-------------------------|-----------|------------|
| 1     | Very Low                | 4         | 5.3        |
| 2     | Low                     | 15        | 20.0       |
| 3     | Moderate                | 48        | 64.0       |
| 4     | High                    | 3         | 4.0        |
| 5     | Very High               | 5         | 6.7        |
|       | Total                   | 75        | 100.0      |



The data reveals the interpersonal relationships of the respondents. Majority i.e., 64% of them were able to maintain their interpersonal relationship at a moderate level. 20% of them have a low interpersonal relationship.

**Table No:- 6  
Psychological Well-being**

| S.r No | Psychological Well-being | Frequency | Percentage |
|--------|--------------------------|-----------|------------|
| 1      | Very Low                 | 5         | 6.7        |
| 2      | Low                      | 26        | 34.7       |
| 3      | Moderate                 | 36        | 48.0       |
| 4      | High                     | 5         | 6.7        |
| 5      | Very High                | 3         | 4.0        |
|        | Total                    | 75        | 100.0      |



Our data reveals the psychological wellbeing of our respondents. It is quite evident and noteworthy from the above result that, majority of our respondents fall in the moderate and low category of wellbeing.

It can be understood that the psychological well-being of our respondent is at risk. The low and moderate levels manifest the vulnerability of individuals.. It is quite important to focus our attention on noticing an individuals' emotional well-being, a task that can take a significant toll to serious consequences in their personal, social and professional lives.

### **CONCLUSION:-**

In this study the overall Mental health well-being seems to be low and moderate. individuals have also reported moderate problems associated with the parameters of well-being or mental health. There are socio-demographic aspects, health aspects, working conditions, mental health well-being scale. The number of females in the current study sample are very less compared to males. The ratio of number of females is increasing, still it is quite less as compared to males, a bigger sample size is required to get a true representation of their levels of well-being and other study parameters. The rating for most of the wellbeing factors like efficiency, satisfaction, sociability, mental health, interpersonal relationship across the study were found to be poor on scale.

### **SUGGESTIONS:-**

Mental health literacy is important to nurture mental health. Counselors and mental health professionals can take up the task to divide with small groups, and then in batches to assist them to understand the importance of mental health and their responsibility to identify the basic structure of discomfort, distress & disorders and when to approach or seek help from Mental Health professionals. Emotional First-Aid sessions in the form of audiovisual aids can help communities to improve their interactions, develop a sense of responsibility, encourage self-directed behavior; learn adaptive ways of expressing feelings and emotions etc.

1. Life skill training can help them to cope up with the crisis Decision making
2. Problem solving
3. Creative thinking/lateral thinking
4. Critical thinking/perspicacity
5. Effective communication
6. Interpersonal relationships
7. Self-awareness/mindfulness
8. Assertiveness
9. Empathy
10. Equanimity
11. Coping with stress, trauma and loss
12. Developing psychological Resilience

Therapeutic interventions can be used to minimize and resolve personal or emotional issues of the people.

1. Person-centered Therapy
2. Cognitive Behavioural Therapy
3. Rational Emotive Behaviour Therapy

Apart from therapy there is an immense need for resource allocation for prevention from a public health perspective.



**This can be possible through following course of action-**

**PRIMARY PREVENTION** -Community awareness programmes,intervention of subgroups at risk of developing mental health issues,subgroups who have already developed mild problems

**SECONDARY PREVENTION-** Reduce the rate of Mental health issues through early detection and treatment

**TERTIARY PREVENTION-** Includes intervention to reduce disability,Increase Rehabilitation,Prevent relapse and recurrences through various Group therapy,Play therapy,Recreational activities for encouraging the strength of expression and thus reducing the stigma attached towards Mental Illness. The strong network of mental health professionals/providers needs to be allotted in the community from the prevention perspective.

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